



UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
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Washington, D.C. 20531

Employee D. Burns

Team 4

C 2700 MAIL ROOM

JAN 13 2000

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#3

Date 12/29/99

To Technology Center 2700

From Dora Stroud, Supervisor
OIPE Customer Service
Charge Location 0350

Subject Customer Requests

Serial Number 09/405,031

File Location PK-2 3B21 Draftsman

The attached request for a corrected file receipt has been completed. Please forward the case to OIPE, Customer Service, CP2-6th Floor.

If you decide to keep the case, assign the request a paper number, endorse contents, punch holes in the documents, and replace the old Bib Data sheet with the updated version in the center of the file

Your cooperation is greatly appreciated

FILE COPY

SERIAL NUMBER 09/405,031	FILING DATE 09/24/99	CLASS 380	GROUP ART UNIT 2766	ATTORNEY DOCKET NO. IL-10360					
<div style="display: flex; justify-content: space-between;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg);"> APPLICANT </div> <div> DOUGLAS R. COFFLAND, LIVERMORE, CA. **CONTINUING DOMESTIC DATA***** VERIFIED _____ **371 (NAT'L STAGE) DATA***** VERIFIED _____ **FOREIGN APPLICATIONS***** VERIFIED _____ IF REQUIRED, FOREIGN FILING LICENSE GRANTED 11/16/99 ** SMALL ENTITY ** </div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);"> RECEIVED JAN 13 2000 TC 2700 MAIL ROOM </div> </div>									
<table border="1" style="width: 100%;"> <tr> <td data-bbox="87 1392 805 1495"> Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>Examiner's Initials</u> _____ <u>Initials</u> _____ </td> <td data-bbox="805 1392 951 1495"> STATE OR COUNTRY CA </td> <td data-bbox="951 1392 1141 1495"> SHEETS DRAWING 5 </td> <td data-bbox="1141 1392 1331 1495"> TOTAL CLAIMS 30 </td> <td data-bbox="1331 1392 1524 1495"> INDEPENDENT CLAIMS 4 </td> </tr> </table>					Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>Examiner's Initials</u> _____ <u>Initials</u> _____	STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 4
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<div style="display: flex; justify-content: space-between;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg);"> ADDRESS </div> <div> LLOYD E DAKIN JR ASSISTANT LABORATORY COUNSEL LAWRENCE LIVERMORE NATIONAL LABORATORY P O BOX 808-L-703 LIVERMORE CA 94551 </div> </div>									
<div style="display: flex; justify-content: space-between;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg);"> TITLE </div> <div> SYSTEM AND METHOD FOR MULTIMEDIA ENCRYPTION </div> </div>									
FILING FEE RECEIVED \$509	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit						



RECEIPT
FILE COPY
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Douglas R. Coffland

Docket No. : IL-10360

Serial No. : 09/405 031

Art Unit :

Filed :

Examiner :

For : System and Method for Multimedia Encryption

TC 2700 MAIL ROOM

JAN 13 2000

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Assistant Commissioner for Patents
Washington, D.C. 20231

REQUEST FOR CORRECTED FILING RECEIPT

1. Attached is a copy of the official filing receipt received from the PTO in the above application for which issuance of a corrected filing receipt is respectfully requested.

■ attached also is a copy of the original New Application Transmittal submitted September 24, 1999.

2. There is an error with respect to the following data, which is:

■ incorrectly entered

and/or

☐ omitted.

Error In

1. ☐ Applicants' names
2. ☐ Applicant's address
3. ☒ Title
4. ☐ Filing Date
5. ☐ Serial Number
6. ☐ Foreign/PCT Application re:
7. ☐ Other

Correct Data

- 1.
- 2.
3. System and Method for
Multimedia Encryption
- 4.
- 5.
- 6.
- 7.

CERTIFICATE OF MAILING

I hereby certify that this paper is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Office of Initial Patent Examination, Customer Service Center, Washington, D.C. 20231, on the date printed below:

Date: November 9, 1999

Kjersti Sudweeks

3. (complete the following applicable item)

A. ☒ The correction(s) is/are not due to any error by applicant and no fee is due.

OR

B. ☐ At least one of the above corrections is due to applicant's error and the fee therefor, under 37 C.F.R. 1.19(h), of \$25 is paid as follows:

☐ Charge Account _____ (\$25.00)

Reg. No.: 38,423

Tel. No.: (925) 423-8554

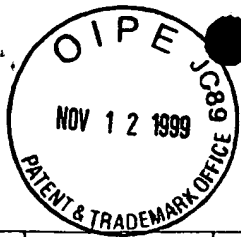

Lloyd E. Dakin, Jr.

P.O. Box 808, L-703

Livermore, CA 94551

Dated: 11-08-99

FILING RECEIPT



UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
ASSISTANT SECRETARY AND COMMISSIONER
OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/405,031	09/24/99	2766	\$509.00	IL-10360	5	30	4

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NOV 01 1999

LLNL--I.P.L.G.

LLOYD E DAKIN JR
ASSISTANT LABORATORY COUNSEL
LAWRENCE LIVERMORE NATIONAL LABORATORY
P O BOX 808-L-703
LIVERMORE CA 94551

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts of Application" ("Missing Parts Notice") in this application, please submit any corrections to this Filing Receipt with your reply to the "Missing Parts Notice." When the PTO processes the reply to the "Missing Parts Notice," the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s) DOUGLAS R. COFFLAND, LIVERMORE, CA.

TITLE
SYSTEM AND METHOD FO MULTIMEDIA ENCRYPTION
SYSTEM AND METHOD FOR MULTIMEDIA ENCRYPTION
PRELIMINARY CLASS: 380

** SMALL ENTITY **

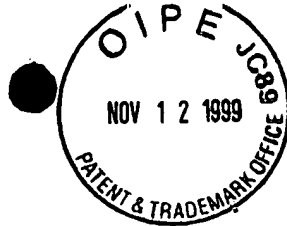
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DATA ENTRY BY: BURNS, DORIS

TEAM: 04 DATE: 10/15/99

|||||

(See reverse for new important information)



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Douglas R. Coffland

Docket No. : IL-10360

Serial No. :

Art Unit :

Filed :

Examiner :

For : System and Method for Multimedia Encryption

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Assistant Commissioner for Patents

Washington, D.C. 20231

CERTIFICATE OF MAILING

I hereby certify that the *attached* correspondence comprising:

1. Request for Corrected Filing Receipt with Certificate of Mailing
2. Filing Receipt (corrected copy)
3. New Application Transmittal (copy)
4. Certificate of Mailing
5. Return Postcard

is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Assistant Commissioner for Patents
Office of Initial Patent Examination
Customer Service Center
Washington, D.C. 20231

on November 9, 1999

Kjersti Sudweeks

(Type or print name of person mailing paper)

(Signature of person mailing paper)



PATENT

Docket No. IL-10360

Assistant Commissioner for Patents
Washington, DC 20231

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NEW APPLICATION TRANSMITTAL

Transmitted herewith for filing is the patent application of Inventor(s):
Douglas R. Coffland

For (title): **SYSTEM AND METHOD FOR MULTIMEDIA ENCRYPTION**

1. Type of Application

☒ This new application is for an original patent.

☐ This new application is a:

- ☐ Division
- ☐ Continuation
- ☐ Continuation-in-part (CIP)

2. Benefit of Prior U.S. Application(s) (35 USC 120)

☐ The new application being transmitted claims the benefit of prior U.S. application(s).

3. ☐ Benefit under 35 U.S.C. 119(e) of United States provisional application(s) listed below:

Application Serial No.

Filing Date

4. Papers enclosed which are required for filing Date Under 37 CFR 1.53(b).

13 Pages of specification

7 Pages of claims

1 Pages of abstract

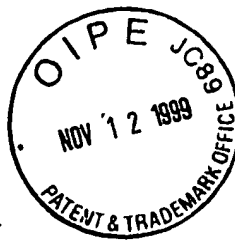
5 Sheets of drawings

☒ formal

☐ informal

5. Additional papers enclosed

- ☐ Preliminary Amendment
- ☒ Information Disclosure Statement
- ☒ Form PTO-1449
- ☐ Special Comments



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6. Declaration or oath

- ☒ Enclosed and executed by
- ☒ inventors
 - ☐ legal representative of inventor(s) 37 CFR 1.42 or 1.43
 - ☐ Not Enclosed

7. Assignment

- ☒ An assignment of the invention to The Regents of the University of California.
- ☒ is attached
 - ☐ will follow

8. Certified Copy

Certified copy(ies) of application(s)

(country)	(application no.)	(filed)
(country)	(application no.)	(filed)

from which priority is claimed

- ☐ is(are) attached.
- ☐ will follow

9. Fee Calculation

CLAIMS AS FILED					
Type of Claim	Number Filed	Included in Basic Fee	Number Extra	Rate	Total Fee
Total Claims	30	-20 =	10	x \$18 =	\$ 180.00
Independent Claims	4	-3 =	1	x \$78 =	\$ 78.00
Multiple Claims				=	\$
Basic Filing Fee				=	\$ 760.00
Sub-Total				=	\$ 1,018.00
Small Entity Filing Fee				=	\$ 509.00



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10. Small Entity Statement(s)

- ☒ Verified Statement that this is a filing by small entity under 37 CFR 1.9 and 1.27 is attached.

Filing Fee Calculation (50% of regular filing fee)

\$ 509.00

11. Fee Payment

- ☐ Not Enclosed
☒ Enclosed (See Account No. Below)

Total Basic Filing Fees To Be Paid

\$ 509.00

12. Method of Payment of Fees

- ☐ Check in the Amount of \$ _____
☒ Charge Account No. 12-0695 in the amount of \$ 509.00
A duplicate of this transmittal is attached.

13. Instructions As To Overpayment/Underpayment

- ☒ credit/charge
Account No. 12-0695
☐ refund

Reg. No.: 38,423

Tel. No.: (925) 423-8554

Dated: September 1, 1999

Lloyd E. Dakin, Jr.

P.O. Box 808, L-703
Livermore, CA 94551